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ASSISTANT COMMISSIONER
FOR PATENTS
WASHINGTON D.C. 20231

Gentlemen,

Enclosed is my patent application for my invention "Cyclo Torque Multipliers" and a check for \$355.00 to cover the handling cost for the Small Entity Fee, as stated in your form "FY 2001".

I am an individual: Small Entity, and not a corporation. I have no assignee for my invention as of today. I worked on these inventions since 1952.

Would you need more details, witness, or money, please specify and inform me by phone (248 828-9688) or by fax (248 828-1734) or by E-mail: flextec@atdial.net

Also, please, confirm that you have received this patent application.

Thank you for you cooperation.

Have a nice day!

Mailed this day 2001-December-21-


Otto Regner -inventor-

01/11/02
JC965 U.S. PTO

A
JC879 U.S. PTO
10/042626
01/11/02

01/11/02
Jc965 U.S. PTO

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)
355.00

Complete if Known

Application Number	
Filing Date	
First Named Inventor	<i>Otto Regner</i>
Examiner Name	
Group Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES						
	Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
105	130	205	65	Surcharge - late filing fee or oath		
127	50	227	25	Surcharge - late provisional filing fee or cover sheet		
139	130	139	130	Non-English specification		
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination		
112	920*	112	920*	Requesting publication of SIR prior to Examiner action		
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
115	110	215	55	Extension for reply within first month		
116	390	216	195	Extension for reply within second month		
117	890	217	445	Extension for reply within third month		
118	1,390	218	695	Extension for reply within fourth month		
128	1,890	228	945	Extension for reply within fifth month		
119	310	219	155	Notice of Appeal		
120	310	220	155	Filing a brief in support of an appeal		
121	270	221	135	Request for oral hearing		
138	1,510	138	1,510	Petition to institute a public use proceeding		
140	110	240	55	Petition to revive - unavoidable		
141	1,240	241	620	Petition to revive - unintentional		
142	1,240	242	620	Utility issue fee (or reissue)		
143	440	243	220	Design issue fee		
144	600	244	300	Plant issue fee		
122	130	122	130	Petitions to the Commissioner		
123	50	123	50	Processing fee under 37 CFR 1.17(q)		
126	180	126	180	Submission of Information Disclosure Stmt		
581	40	581	40	Recording each patent assignment per property (times number of properties)		
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))		
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))		
179	710	279	355	Request for Continued Examination (RCE)		
169	900	169	900	Request for expedited examination of a design application		
Other fee (specify) _____						
*Reduced by Basic Filing Fee Paid						
SUBTOTAL (3)						(\$)

FEE CALCULATION

1. BASIC FILING FEE						
Large Entity		Small Entity				
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description		Fee Paid
101	710	201	355	Utility filing fee		355
106	320	206	160	Design filing fee		
107	490	207	245	Plant filing fee		
108	710	208	355	Reissue filing fee		
114	150	214	75	Provisional filing fee		
SUBTOTAL (1)						(\$) 355.00

2. EXTRA CLAIM FEES

Total Claims 16 Extra Claims Fee from below Fee Paid

Independent Claims 16 - 20** = 0 X 0 = 0

Multiple Dependent Claims 0 - 3** = 0 X 0 = 0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Code (\$)	Fee Code (\$)			Fee Description	Fee Paid
103	18	203	9			Claims in excess of 20	
102	80	202	40			Independent claims in excess of 3	
104	270	204	135			Multiple dependent claim, if not paid	
109	80	209	40			** Reissue independent claims over original patent	
110	18	210	9			** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)							

*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	OTTO REGNER	Registration No. (Attorney/Agent)	<u> </u>
Signature	<i>Otto Regner</i>	Telephone	248 828 9688
		Date	12-20-2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.